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Bib Data Sheet

CONFIRMATION NO. 8967

<b>SERIAL NUMBER</b> 09/942,944	<b>FILING DATE</b> 08/31/2001 <b>RULE</b>	<b>CLASS</b> 707	<b>GROUP ART UNIT</b> 2171	<b>ATTORNEY DOCKET NO.</b> 40053.011300
<b>APPLICANTS</b> David Stebbings, Vienna, VA; Adam William Strasel, Centreville, VA; <i>yes B50</i>				
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/229,037 08/31/2000 AND CLAIMS BENEFIT OF 60/229,040 08/31/2000 AND CLAIMS BENEFIT OF 60/229,038 08/31/2000 <i>yes B50</i> AND CLAIMS BENEFIT OF 60/229,039 08/31/2000 AND CLAIMS BENEFIT OF 60/248,283 11/14/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <i>none</i> <b>** SMALL ENTITY **</b> ** 10/02/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> VA	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 42
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> 22191				
<b>TITLE</b> System and method for positive identification of electronic files				
<b>FILING FEE RECEIVED</b> 717	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	